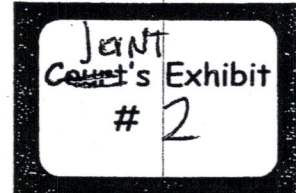




1 IN THE THIRTEENTH JUDICIAL CIRCUIT OF THE STATE OF ILLINOIS  
2 LASALLE COUNTY, ILLINOIS

3  
4 KEVIN R. KRAMER,  
5  
6 v. Petitioner,  
7  
8 JULIA C. EICKMEIER,  
9  
10 Respondent.



)  
)  
) Case No. 15 F 153  
)  
) IV-D: C02786053  
)  
)

10 THE EVIDENCE DEPOSITION of DR. CHANNING  
11 PETRAK, a witness, called by the Petitioner for  
12 examination pursuant to notice and pursuant to the  
13 provisions of the Code of Civil Procedure and the Rules  
14 of the Supreme Court thereof pertaining to the taking of  
15 depositions for said purpose, taken before me, Dee Dee  
16 Sullivan, CSR-RPR, License #084-002624, a Notary Public  
17 in and for the County of Peoria and the State of  
18 Illinois, at 416 Main Street, Suite 600, in the City of  
19 Peoria, County of Peoria, and State of Illinois,  
20 commencing at 1:44 p.m. and ending at 3:53 p.m. on the  
21 22nd day of December, 2016.

22 ORIGINAL  
23

1  
2 APPEARANCES:  
3

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I N D E X

DR. CHANNING PETRAK

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\*Respondent's Exhibit No. 1 was withdrawn by counsel and not offered into evidence. Counsel retained original exhibit.



1  
2 MR. STEELE: Let the record show this is the  
3 evidence deposition of Dr. Channing Petrak, taken  
4 pursuant to Supreme Court Rule, pursuant to notice  
5 and by agreement of the parties.

6 Counsel, may we have the usual  
7 stipulation regarding signatures?

8 MR. MISKELL: Sure.

9 MR. STEELE: And introduction of the  
10 transcript at trial without the necessity of calling  
11 the reporter?

12 MR. MISKELL: Yes.

13 MR. STEELE: Usual stenographic stipulations.

14 (Marked for identification

15 Petitioner's Exhibit No. 1)  
16

17 DR. CHANNING PETRAK,  
18 being first duly sworn, was deposed and says as follows,  
19 in answer to:

20 EXAMINATION BY MR. STEELE:

21 Q Doctor, for the record would you state your name.

22 A Sure. Channing Petrak.

23 Do you want me to spell it too?

1 Q Please.

2 A C-H-A-N-N-I-N-G P-E-T-R-A-K.

3 Q Okay. And how are you employed?

4 A I'm the Medical Director of the University of

5 Illinois College of Medicine at Peoria, Pediatric

6 Resource Center.

7 Q Are you licensed to practice in the state of

8 Illinois?

9 A Yes.

10 Q I'll show you what we've marked as Petitioner's

11 Exhibit No. 1 for deposition purposes, and ask you if

12 you can identify that.

13 A Yes. It's a copy of my curriculum vitae.

14 Q All right. And what is your educational background?

15 A I have a Bachelor of Arts in economics, a Master's of

16 Business Administration and a medical doctorate, and

17 then I did a pediatrics residency following my

18 graduation from medical school.

19 Q And your license?

20 A I'm licensed to practice medicine and then I have a

21 Board certification in general pediatrics as well as

22 child abuse pediatrics.

23 Q And where are you on the faculty at?

1       A    University of Illinois College of Medicine here in  
2            Peoria.

3       Q    All right.  And what is your specialty?

4       A    Child abuse pediatrics.

5       Q    And what does that involve?

6       A    Well, pediatrics is the practice of medicine specific  
7            to children, and then child abuse pediatrics is the  
8            evaluation and assessment of children when there's a  
9            concern of abuse or neglect.  So it involves looking  
10          at a child, looking at their injuries, determining  
11          the mechanism of injury.  Looking for other diagnoses  
12          that could appear to be abuse but aren't, looking for  
13          neglect, medical neglect, failure to thrive, sexual  
14          abuse, so it encompasses all of the child  
15          maltreatment forms.

16      Q    Okay.  And you are the Medical Director of the  
17          Pediatric Resource Center here in Peoria?

18      A    Yes.

19      Q    And is that devoted to pediatric medicine?

20      A    It's specifically designed, the program is, to do  
21          evaluations and provide advocacy for abuse and  
22          neglect.

23      Q    Okay.  Of children?



1 A Yes.

2 Q Now how long you been doing that?

3 A I've been in a part-time capacity since 2003 when I  
4 finished my residency and started working for the  
5 University, and then I became Medical Director in  
6 2011. I've been at least 80% time for several years  
7 now, and just this past February I went to 100% time.

8 Q All right. With regard to Exhibit No. 1, does this  
9 list all of your educational background and all of  
10 your credentials?

11 A Um, yeah. I haven't updated it for a while but  
12 it's -- yes.

13 Q And it shows your publications and articles you have  
14 written in the field.

15 A I don't have anything published. I have a  
16 presentation that I did on bleeding disorders --

17 Q Okay.

18 A -- for screening purposes.

19 Q And regularly give classes in child neglect and abuse  
20 training?

21 A Yes.

22 MR. STEELE: Counsel, may we introduce  
23 Petitioner's Exhibit No. 1 without objection?

1 MR. MISKELL: No objection.

2 MR. STEELE: Okay.

3 BY MR. STEELE:

4 Q Have you testified in trials in the state of Illinois  
5 previously?

6 A Yes.

7 Q And in the field of pediatric medicine?

8 A Specifically to child abuse pediatrics, yes.

9 Q Have you been qualified as an expert in that field?

10 A Yes.

11 Q What type of cases have you testified in?

12 A Physical abuse, head injury, child sexual abuse,  
13 child pornography, neglect, failure to thrive, death  
14 cases. Multiple jurisdictions.

15 Q Okay. And do you do work with the Department of  
16 Children and Family Services of Illinois?

17 A They do consult us, yes.

18 Q Have you done it on a regular basis?

19 A Yes.

20 Q As such are you familiar with Madeline Kramer?

21 A Yes.

22 Q Do you have your report on Madeline Kramer with you?

23 A Yes.

1 Q All right.

2 MR. STEELE: I ask that this be marked as  
3 Petitioner's Exhibit No. 2.

4 (Marked for identification  
5 Petitioner's Exhibit No. 2)

6 BY MR. STEELE:

7 Q I'll show you what's been marked as Petitioner's  
8 No. 2, ask you if you're familiar with that.

9 A Yes, I am.

10 Q What does it purport to be?

11 A It is a report that I generated reviewing records  
12 that I was provided on Madeline at the request of  
13 DCFS.

14 Q All right. Does your signature appear on the last  
15 page of this report?

16 A Yes, it does.

17 Q Does that summarize your findings and your  
18 conclusions with regard to Madeline?

19 A Yes.

20 Q When were you first contacted regarding Madeline?

21 A October 4th was the request for this, this particular  
22 request for referral.

23 Q Okay. And who were you contacted by?



1 A Ann Patton was the source of this referral.  
2 Q And what was the request?  
3 A To review records over time with respect to a large  
4 number of examinations for sexual abuse.  
5 Q And as regarding the minor child Madeline Kramer?  
6 A Yes, sir.  
7 Q And her date of birth is January 20th, 2013?  
8 A Yes.  
9 Q All right. Did they then supply you with those  
10 records?  
11 A They did. Madeline had been evaluated by the  
12 Pediatric Resource Center twice before so I had  
13 previous records that we had of our own as well.  
14 Q Did you rely upon those records?  
15 A Yes.  
16 Q What other investigation did you do?  
17 A It was just a record review.  
18 Q All right. And what records did you then review?  
19 A I reviewed all of the records provided by DCFS as  
20 well as the records that I had previously because of  
21 our prior involvement with Madeline.  
22 Q Okay. And what were your impressions from those  
23 records?

1       A    That there were a large number of examinations or  
2           evaluations done for sexual abuse given her age.  
3           There were at least 13 that I was aware of, and based  
4           on those records -- there are records I did not have  
5           for review -- and that was an excessive number of  
6           exams for sexual abuse. Also, just based on the  
7           records I reviewed that there were actions by  
8           Madeline's mother that were concerning to me.

9       Q    Okay. All right.

10                   MR. MISKELL: Hold on one second. Can you  
11           please read back the first part of that answer.

12                                   (The reporter read back the  
13                                   answer.)

14   BY MR. STEELE:

15       Q    As part of your review of the records, do you review  
16           the prior investigations by DCFS?

17       A    I didn't have -- I don't believe I had all of the  
18           investigations, but I did have the most recent  
19           investigations, yes.

20       Q    And what dates were those investigations, if you can  
21           tell?

22       A    They were looks like I had August and July -- sorry,  
23           August 2nd, 2016; July 20th of '16; May of '16,

1 May 13th; 11/24/2015; 11/19/2015; June 25th, 2015;  
2 and March 15th of 2015.

3 Q And were those allegations of sexual abuse against  
4 Kevin Kramer by the Respondent, Julia Eickmeier?

5 A They were. Although, there was some information that  
6 there was also an allegation against a therapist. I  
7 don't recall her name off the top of my head.

8 Q All right. With regard to the allegation against the  
9 Petitioner, Kevin Kramer, what were the allegations,  
10 if you know?

11 A They were child sexual abuse, so that included  
12 touching, fondling, on several occasions there were  
13 comments about semen being present, so they were all  
14 child sexual abuse allegations.

15 Q And did she have other allegations regarding her  
16 being the subject of any type of special activities?

17 A There were a few comments made about satanic rituals,  
18 although there wasn't a lot of detail about that in  
19 the records I reviewed, so there were a few other  
20 comments about that.

21 Q Okay. Did she allege other people had sexually  
22 abused Madeline besides Kevin Kramer?

23 A Yes. At one point there was some information that it



1           was grandparents.

2                   MR. MISKELL: Objection. No foundation as to  
3           the source of the information.

4 BY MR. STEELE:

5       Q   What was the source of your information for the other  
6           allegations, if you know?

7       A   It was the DCFS investigator.

8       Q   And who else had she alleged had abused Madeline?

9       A   Grandparents.

10                   MR. MISKELL: I'm going to object again as to  
11           the foundation. She said from the DCFS investigator,  
12           I'm not sure if that's from written or a phone call  
13           she had or who it was or who she's identifying.

14 BY MR. STEELE:

15       Q   Do you know the source of that information?

16       A   It was a written report. I don't recall the name of  
17           the investigator because there were multiple  
18           investigators given that there had been multiple  
19           investigations.

20       Q   You reviewed approximately seven reports from DCFS?

21       A   Correct.

22       Q   And that was information contained in one of those  
23           reports?

1 A Correct.

2 Q All right. And I think you also indicated that there  
3 was an allegation against a counselor or therapist?

4 A Correct.

5 Q Do you know the details of that allegation?

6 A Yes. Madeline was seeing the therapist, her mother  
7 had said she walked back toward the room and saw that  
8 the therapist's pants were unzipped and undone and so  
9 she alleged that there had been sexual abuse that had  
10 taken place.

11 Q All right. And with regard to that allegation, do  
12 you know if that allegation was founded or unfounded?

13 A It was unfounded.

14 Q All right. Now with regard to the report of  
15 August 2nd, 2016, do you remember any of the details  
16 of that report?

17 A As far as I understand that one was also just that  
18 there was touching that had occurred. I don't  
19 believe there was a -- that one I believe there was a  
20 rape kit done, so that there was a kit done. There  
21 was multiple times that kits were done.

22 Q And did she also give DCFS a laptop or a binder, do  
23 you recall that?

1 A I don't know that it was turned over to DCFS but it  
2 was presented to them in a discussion about the  
3 allegations.

4 Q All right. When did these allegations begin, if you  
5 know?

6 A Madeline was about seven months old when they  
7 started.

8 Q Okay. And you indicated that OSF -- or your PRC had  
9 contact with Madeline prior to you being contacted by  
10 DCFS?

11 A Yes. Madeline was admitted at OSF with concerns of  
12 sexual abuse.

13 Q Do you know when that was?

14           A     She was an infant.

15 Q All right.

16 A She was I think about ten months old, nine or ten  
17 months old at the time.

18 Q Is that detailed in your report also?

19           A     Yes.

20 Q Do you want to review your report?

21                    A     Yes.

(Pause)

It was 11/10 of '13.



1 Q Okay. Did you review the records of that?  
2 A Yes.  
3 Q And what did you find?  
4 A Her examination was normal. She was followed up in  
5 the PRC clinic, in our clinic, on the 22nd of  
6 November following that hospitalization and her  
7 examination was normal at that time as well.  
8 Q Okay. And besides the examination being normal, was  
9 there anything unusual about the report at that time?  
10 A At that time of the hospitalization Madeline's mother  
11 commented that she knew there had been sexual abuse  
12 because spirits had come to her in a dream and had  
13 told her that it had happened.  
14 Q Okay. Now that was November 10th, 2013. Had she  
15 previously been seen on November 8th, 2013, at Perry  
16 Memorial Hospital?  
17 A Yes. She was also seen just after that, so in  
18 between the hospitalization and the Pediatric  
19 Resource Center visit she was also seen at Perry  
20 Memorial.  
21 Q So prior to bringing her to the Children's Hospital  
22 of Illinois she had been seen at Perry two days  
23 previously. Did you review those records?

1 A Yes.

2 Q And what did you find from your review of those  
3 records?

4 A That there was concern of sexual abuse, comments  
5 about white gunk, obviously concern for semen. Exam  
6 was normal. And then she was later seen at  
7 Children's Hospital and admitted.

8 Q Okay. And at the Perry Memorial Hospital what was  
9 the diagnosis, if you know?

10 A I believe it was just rash.

11 Q Okay.

12 A Diaper rash.

13 Q And then within the same period of time,  
14 November 18th, 2013, she's also seen again at the  
15 Perry Memorial emergency room. Did you review those  
16 records?

17 A Yes.

18 Q And what did you find from your review of those  
19 records?

20 A There was no concern based on the exam, exam was  
21 normal. Then she was followed up by Pediatric  
22 Resource Center again.

23 Q Okay. And that follow-up, was that on November 22nd,

1           2013?

2           A    Yes.

3           Q    And did you review those records?

4           A    Yes.

5           Q    And what did you find from your review of those  
6                records?

7           A    Her examination was normal, and then education was  
8                provided about hygiene and normal rashes in a young  
9                girl, normal behaviors in infants and toddlers, the  
10              basic information that we do provide to parents.

11          Q    Okay. And also you reviewed -- at that time PRC was  
12                reviewing records from Perry Memorial Hospital also?

13          A    Correct.

14          Q    Was there concern that this child within a space of  
15                two weeks had been seen this many times for sexual  
16                abuse?

17          A    Yes. We do try to -- it's the standard of care to  
18                try to limit the number of exams in children just  
19                because it can be traumatizing to have that many  
20                exams in such a short amount of time. Given that she  
21                was so young I would worry less about being asked too  
22                many questions because she wasn't verbal, but we do  
23                try to limit the number of examinations for children,



1           yes.

2       Q   And was Julia given any education at that time

3           regarding care for the minor child?

4       A   Yes. We always talk about what are the signs to look

5           for, what is normal, normal sexual behaviors in

6           children, general diaper care, peri care, and you

7           know what are to call us for or concerns that they

8           can call us about.

9       Q   Okay. Then we jump ahead to 2015. There was no

10          reports in 2014 that we know about.

11       A   Not that I'm aware of.

12       Q   Okay. And you had said earlier in your deposition

13           that you thought there may have been other incidences

14           but you did not have any information on them.

15       A   Correct. And it appeared that there were potentially

16           visits at other facilities that I didn't have the

17           records for.

18       Q   Okay. And that could have taken place in 2014, you

19           think?

20       A   It could have, yes.

21       Q   Given her history.

22       A   Yes.

23       Q   Then we jump ahead to February 12th, 2015. This

1 involves OSF.

2 A Yes.

3 Q And what happened at that time?

4 A There were phone calls made with concerns and then  
5 Madeline was seen again for concerns of sexual abuse.  
6 And then Pediatric Resource Center again saw Madeline  
7 in 2015 mostly because of concerns that she was  
8 getting examinations done at potentially other places  
9 that aren't experienced in child sexual abuse.

10 MR. MISKELL: Objection, no foundation.

11 MR. STEELE: What's the nature of the  
12 objection?

13 MR. MISKELL: No foundation as to the  
14 statement that she was evaluated at different  
15 facilities between November 26th, 2013, and  
16 February 12th, 2015.

17 She testified she hasn't reviewed any  
18 records, no opinions with regards to that question  
19 appears in her report and therefore would be a  
20 violation of Rule 213(f) as an undisclosed opinion.

21 MR. STEELE: All right.

22 BY MR. STEELE:

23 Q With regard -- asking you about your opinion as of

1 the February 18th, 2015, report --

2 MR. MISKELL: Or February 18th same  
3 objection.

4 MR. STEELE: -- February 18th report --

5 MR. MISKELL: Same objection, undisclosed  
6 opinion and no evidence of her reviewing any record.

7 MR. STEELE: This is part of her opinion,  
8 which you have in front of you, sir.

9 BY MR. STEELE:

10 Q All right. So with regard to your February 18th,  
11 2015, report, again what education had been presented  
12 to Madeline at that time -- Julia at that time?

13 A At that visit there was extensive education given on  
14 normal sexual behaviors for young children. So  
15 there's extensive information on child sexual  
16 behaviors, the norms and what is not normal, so there  
17 was extensive education given to Madeline's mother  
18 about that and how to talk to a young child about  
19 sexual safety and body safety.

20 MR. MISKELL: I'm going to object. There's  
21 no notation in her report with regards to any  
22 documentation given to her regarding talking to a  
23 child.



1                   The medical records have never been  
2 itemized and/or itemized for her review, none of the  
3 documentation has been itemized that she is referring  
4 to in your report.

5                   MR. STEELE: Counsel, you've been previously  
6 submitted a copy of the report from February 18th,  
7 2015, which is what she's referring to.

8                   MR. MISKELL: I have "Madeline was evaluated  
9 at our outpatient clinic. The examination was  
10 normal. Extensive education provided with respect to  
11 touching her genitals and genital irritation," that's  
12 it.

13                   MR. McCLINTOCK: No, this one.

14                   MR. MISKELL: I have an October 28, 2016,  
15 report, that's what I have. If there's any other  
16 report out there I don't have it, and any reference  
17 to that is going to be objectionable.

18                   MR. STEELE: Was that given in discovery,  
19 Jason?

20                   MR. QUERCIAGROSSA: I have to check the  
21 computer and see.

22                   MR. MISKELL: As a matter of fact on the  
23 deposition notice and the answer to 213(f) that was

1 just provided to us on October 31st, 2016, they refer  
2 to Exhibit A, which is the October 28th, 2016,  
3 report. If there are other reports --

4 MR. STEELE: That's what she's testifying to.

5 MR. MISKELL: -- or supplemental reports, I'm  
6 going to object to the use of them because they were  
7 never provided to me prior to the deposition today.

8 MR. STEELE: She's testifying to examination  
9 held on February 18th, 2015.

10 MR. MISKELL: For which I have not received  
11 any records, I've only got the one paragraph blurb.

12 MR. McCLINTOCK: Well, let me make a  
13 suggestion. Why don't you go ahead. His objection  
14 is preserved and --

15 MR. MISKELL: I don't even know if she was  
16 the treating physician at that time.

17 MR. McCLINTOCK: -- and you can look later to  
18 see whether in fact it has been tendered in  
19 discovery.

20 MR. STEELE: All right.

21 MR. MISKELL: Well, tendered in discovery and  
22 answered pursuant to his answer that he filed on  
23 October 31st, 2016, with regards to 213(f), two

1 different things.

2 MR. STEELE: She testified consistent with  
3 the report you have in front of you. She's  
4 testifying as to the education provided at that time,  
5 which is contained in her report.

6 MR. MISKELL: And the report only references  
7 information respecting touching of her genitals and  
8 genital irritation of the vulva.

9 MR. STEELE: Also indicates extensive  
10 education is provided to Madeline's mother to normal  
11 behavior and that's what she's testifying to.

12 MR. MISKELL: With respect to touching her  
13 genitals and general irritation of the vulva.

14 MR. McCLINTOCK: Well, he can expand upon  
15 that and your objection will be noted.

16 BY MR. STEELE:

17 Q All right. What else was done at that time?

18 A I mean we -- so it's the general physical exam,  
19 genital examination, colposcopic exam, and then the  
20 education was provided.

21 Q And was that provided under your direction?

22 A Yes. I review all of the images and I review all of  
23 the documentation.



1 Q Okay.

2 MR. McCLINTOCK: Excuse me.

3 MR. MISKELL: Off the record for a second.

4 (Discussion held off the

5 record.)

6 (Marked for identification

7 Petitioner's Exhibit No. 3)

8 BY MR. STEELE:

9 Q I'm showing you what's marked as Petitioner's

10 Exhibit No. 3 for deposition purposes, and ask you to

11 review that.

12 A (Witness complies).

13 Q All right. Are you familiar with that document?

14 A Uh-hum.

15 Q And did you review this document and sign off on it?

16 A Yes.

17 MR. MISKELL: What document are you referring

18 to?

19 MR. STEELE: Petitioner's Exhibit No. 3.

20 MR. MISKELL: What is it? You want to

21 identify it for the record.

22 MR. McCLINTOCK: 2/18.

23

1 BY MR. STEELE:

2 Q And this is a report dated February 18th, 2015 --

3 A Yes.

4 Q -- regarding Madeline's Kramer's visit to your  
5 center?

6 A Yes.

7 Q Did you rely upon this report as you prepared your  
8 report and your opinion today?

9 A Yes.

10 Q All right.

11 MR. MISKELL: Again, with regards to your  
12 213(f) answer, she will testify consistently with the  
13 opinions and conclusions contained in her report of  
14 October 28th, 2016.

15 MR. STEELE: Counsel, your objection is  
16 noted.

17 MR. MISKELL: All right.

18 BY MR. STEELE:

19 Q Okay. You have in front of you from February 18th,  
20 2015, and other than the highlighting on it, is that  
21 report substantially the report that you gave at that  
22 time?

23 A Yes.

1 Q And as prepared under your direction and under your  
2 control?

3 A Yes, sir.

4 Q And contains your conclusions?

5 A Yes. The nurse practitioner saw Madeline but I  
6 reviewed all of the images and I reviewed her report  
7 prior to it being released, and it has my signature,  
8 so yes.

9 Q And it does show that her examination is normal?

10 A Yes.

11 MR. MISKELL: Well, I'm going to object in  
12 that the images and the records with regards to that  
13 report have not been tendered to the Respondent, the  
14 images she reviewed.

15 MR. McCLINTOCK: Objection is noted.  
16 Continue.

17 MR. STEELE: We note your objection.

18 BY MR. STEELE:

19 Q What else is significant about this report with  
20 regard to your findings?

21 A The exam was normal, and there was a significant  
22 amount of time, as evidenced by the discussion area,  
23 spent on normal behaviors, and there's a section that



1 discusses talking about teaching a child what's  
2 appropriate, what's not appropriate, talking about  
3 their own body.

4 So there was a significant amount of  
5 time spent in discussion with mother about what's  
6 normal behavior for a child this age and what is not  
7 and how to talk to a child about those sorts of  
8 things.

9 Q Was she also advised with regard to the child's rash  
10 what could be done to avoid that?

11 A Yes.

12 Q And what was she advised at that time?

13 A It's typically a hygiene issue and that's what was  
14 discussed is just normal diaper care, normal hygiene  
15 for young girls. It's a very common problem, and so,  
16 yes, hygiene was discussed.

17 Q Okay. And was also concerns expressed at that time  
18 regarding Julia's attitude or her behavior?

19 A There were some -- there were concerns noted about  
20 hypervigilance and that counseling was recommended.

21 Q Okay. Can you explain what you mean by  
22 "hypervigilance."

23 A The hypervigilance surrounding the concern of sexual

1 abuse and around Madeline's behaviors and her  
2 genitals.

3 I would recommend the same for any type  
4 of hypervigilance in a parent whether it was about a  
5 child's having headaches or having any medical  
6 problem. If a parent has hypervigilance or anxiety  
7 with a certain area of their child's health, it is  
8 helpful for the parent to receive counseling because  
9 their anxiety can be problematic for the child.

10 Q So her hyperanxiety has an impact upon Madeline?

11 A Yes.

12 Q And what is that impact?

13 A Children will respond based on how their parents act.  
14 If a parent -- even when we do our exams if a parent  
15 is very anxious we will sometimes have them leave the  
16 room because the child will do better. A lot of  
17 medical providers do the same thing because children  
18 will be anxious if their parent is anxious.

19 MR. MISKELL: I'm going to object and move to  
20 strike the last two questions in that they are not  
21 opinions or issues that have been disclosed prior to  
22 the deposition today pursuant to Supreme Court  
23 Rule 213(f).

1 MR. STEELE: Your objection is noted.

2 BY MR. STEELE:

3 Q Was there anything further?

4 A Not -- no, not really.

5 Q All right. At this point Madeline is two years old?

6 A Yes.

7 Q And less than a month later she now has Madeline at  
8 Edwards Hospital.

9 A Yes.

10 Q And you reviewed those records?

11 A Yes.

12 Q Why was Madeline at Edwards Hospital at that time?

13 A Concerns for sexual abuse.

14 Q Do you know what happened at that time there?

15 A There were multiple visits at Edwards Hospital and  
16 I'd have to look at each individual one, because at  
17 some of them a kit was requested, a rape kit,  
18 forensic evidence collection kit, at some of them it  
19 was requested and then refused, or an exam was  
20 refused, so there were multiple visits at that  
21 particular location.

22 Q And each of these visits that you examined the  
23 records, were they allegations of sexual abuse



1           against Madeline by another individual, either Kevin  
2           Kramer or someone else?

3       A    Yes.

4       Q    And were all those examinations that you reviewed for  
5           Edwards Hospital were the examinations normal?

6       A    Yes. At most there was some minor redness, but  
7           that's a normal variant.

8       Q    Okay. And one of these examinations was on  
9           March 17th, 2015. At that point were pictures taken  
10          of Madeline's genitals?

11                           Do you want to review your report?

12      A    Yes.

13      Q    This is March 17th, 2015.

14      A    Yes. Although the pictures were reportedly taken by  
15          Madeline's mother as opposed to the hospital taking  
16          them for their exam purposes, which is not an  
17          uncommon thing if a sexual assault nurse examiner  
18          does an exam, or a sexual abuse provider such as my  
19          program, we do document, we do photo document, but  
20          these were reportedly taken by Madeline's mother.

21      Q    Is that a source of concern you made in your report?

22      A    Yes.

23      Q    And why is that?

1 A It's concerning for several reasons. A parent taking  
2 photos of a child's genitals is concerning in that it  
3 normalizes that behavior for the child. If it's done  
4 repeatedly then the child accepts that as a normal  
5 behavior which puts them at risk for other people  
6 doing the same thing and them not realizing.

7 MR. MISKELL: I'm going to object and move to  
8 strike that answer and opinion. Again, is not  
9 contained within her report and is not -- is an  
10 undisclosed opinion prior to the deposition.

11 MR. STEELE: Okay. Objection noted.

12 Go ahead.

13 THE WITNESS: Also, it's not really serving a  
14 purpose for a parent to take a picture of their  
15 child's genitals for medical reasons or evidentiary  
16 reasons, so it's really a -- it's an abnormal thing  
17 for a parent to do --

18 MR. MISKELL: Objection, no foundation.

19 THE WITNESS: -- to take pictures of their  
20 child's genitals.

21 BY MR. STEELE:

22 Q And you base that upon your professional training?

23 A Yes.

1 Q And your experience in the field of child abuse?

2 A Yes.

3 Q Okay. And directing your attention then to June 5th,  
4 2015, OSF was again involved in a phone triage.

5 A Triage note, yes.

6 Q Okay. And what is that?

7 A Okay. So there's a phone system where you can call  
8 and ask the nurse basically for advice, and so there  
9 was a call made with concerns about possible sexual  
10 abuse -- or it was a little bit nebulous, Madeline  
11 not wanting to sit down after having been left with  
12 dad for just a few minutes -- and so advice was given  
13 about having her seen at an emergency department.

14 Q Okay. And what was her response, Julia's response  
15 that is?

16 A Right. Madeline's mother didn't want to go to an  
17 emergency department necessarily. She did comment  
18 about she had taken photos and video, and she'd lost  
19 one phone and another phone was smashed, so there was  
20 a lot of discussion with the phone nurse about not  
21 wanting to go to an emergency department but just  
22 wanting things documented.

23 She was advised to go to an emergency



1 department though.

2 Q Do you know did she follow up on that?

3 A Eventually, yes, I believe there was a emergency  
4 department visit, but not immediately.

5 Q Okay. Next report apparently you looked at was  
6 November 24th, 2015. This was another Edwards  
7 Hospital report. Did you review those records?

8 A Yes.

9 Q And what did you find from your review of those  
10 records?

11 A There was a visit to the emergency department. I  
12 believe this is the one where there was not a --  
13 wanted a kit done but no exam and then refused to  
14 have the kit done.

15 There were multiple visits at the same  
16 hospital over a four-day time period right after that  
17 visit either for exam or for evidence collection with  
18 the same allegation, that there had been sexual  
19 abuse.

20 Q Okay. So there was a visit to Edwards Hospital on  
21 November 24th and also November 26th?

22 A Yes.

23 Q And those are the records you reviewed and are

1 contained in your report also?

2 A Yes.

3 Q And then the next day on November 27th, 2015, she

4 went to Illinois Valley Community Hospital. Did you

5 review those records?

6 A Yes.

7 Q What did you find from your review of those records?

8 A Madeline's mother went to the emergency department

9 but did not want -- really didn't want an

10 examination, wasn't apparently comfortable with the

11 physician there and she just wanted the doctor to

12 document that she had smelled Madeline's vagina and

13 it smelled like semen, and didn't really want

14 anything beyond that so ended up leaving.

15 Q Is that normal medical procedure?

16 A No. No, not at all. You don't document anything

17 that you didn't -- especially an exam finding without

18 noticing yourself.

19 Q So then the next day, November 28th, 2015, she went

20 back to Edwards Hospital. Did you review those

21 records?

22 A Yes.

23 Q And what did you find from review of those records?

1 A There was the allegation of sexual abuse, the concern  
2 about potential semen. I do believe an evidence  
3 collection kit was done at that time -- if not then,  
4 then the next day -- but there were multiple visits  
5 in that short timeframe.

6 Q Do you know the results of examination November 28th,  
7 2015?

8 A It was normal.

9 Q Okay. Then 12/3/2015 she went back to Edwards  
10 Hospital again. Did you review those records?

11 A Yes.

12 Q Okay. Anything in the review of those records that  
13 you noted?

14 A Exam was normal.

15 Q Okay. In any of these visits is she alleging sexual  
16 abuse?

17 A Yes.

18 Q In the last report you have then is from October 3rd,  
19 2016, from Edwards Hospital, and you review those  
20 records?

21 A Yes.

22 Q And did she present herself at Edwards Hospital with  
23 Madeline alleging sexual abuse?



1 A Yes.

2 Q What was the result of that examination?

3 A It was a normal exam.

4 Q Was rape kit taken at that time?

5 A I believe there was one at that last visit, yes.

6 Q Okay. Do you know what the result of that visit was?

7 A Of the examination or of the evidence collection?

8 Q Of the examination.

9 A The examination was normal.

10 Q Okay. And was the report made to Department of

11 Children and Family Services as a result of that

12 visit?

13 A Yes.

14 Q What was that report?

15 A I think the report was made because of the multiple

16 visits to the same hospital with the same allegation.

17 Q So a physician at that hospital contacted DCFS?

18 A Yes.

19 Q And what was the allegation made at that time?

20 A I don't know the exact allegation made. DCFS usually

21 doesn't always pass that along to us --

22 Q Okay.

23 A -- but the concern was that there were multiple

1 visits for the same allegation and multiple, multiple  
2 times, and then sometimes, even though the concern  
3 was sexual abuse, that there was refusal of  
4 examination or refusal of treatment despite the  
5 allegation.

6 Q As a result of that allegation then DCFS contacted  
7 you.

8 A Yes.

9 Q And you made your current inquiry.

10 A Yes.

11 Q As part of the inquiry you did review all of the  
12 records we've just gone through.

13 A Yes.

14 Q And the DCFS reports.

15 A Yes.

16 Q And the police reports. Anything else you reviewed?

17 A If the police report -- if there was part of it  
18 contained within the DCFS report I reviewed it, but  
19 not anything -- I didn't get anything separately.

20 Q All right. So based upon your review of the reports  
21 given to you, as well as your own personal experience  
22 with Julia Eickmeier and Madeline Kramer, what are  
23 your impressions?

1       A   My impression was that there was -- for a child this  
2       age in that short timespan, which covered a 34-month  
3       timespan, that there were numerous exams or  
4       evaluations for child sexual abuse, that there was an  
5       excessive focus on child sexual abuse.

6               I had concerns about the photos being  
7       taken and lost apparently, by the mother's report,  
8       which puts Madeline at risk because anyone with  
9       access to those photos has access to photos of her  
10      genitals, which is very risky for her, and that all  
11      of these examinations and this intense focus on child  
12      sexual abuse by her mother, who at one point even  
13      reported that she had manipulated her genitals prior  
14      to taking photos --

15             MR. MISKELL:  Objection.  No foundation as to  
16      time, place, date.

17             MR. STEELE:  Okay.  Objection noted.

18   BY MR. STEELE:

19       Q   Was that manipulation noted in the reports that you  
20       reviewed?

21       A   Yes.

22             MR. MISKELL:  I would object that it's not in  
23      her October 28, 2016, report.



1 MR. STEELE: I think you'll find it in the  
2 last page.

3 BY MR. STEELE:

4 Q Go ahead.

5 A That there's risk of physical harm, there's risk of  
6 psychological harm, and that all of that put together  
7 is consistent with medical child abuse.

8 Q All right. So based upon your review of the DCFS  
9 records, the police reports or any other reports you  
10 have, the hospital records, did you form an opinion  
11 based upon a reasonable degree of medical certainty?

12 A Yes.

13 Q What is that opinion?

14 A That the repeated concerns of sexual abuse, child  
15 sexual abuse by Madeline's mother, and requesting  
16 multiple examinations, multiple evidence collection  
17 kits by numerous providers was a risk for Madeline  
18 and that it was consistent with medical child abuse.

19 Q And can you define medical child abuse for us.

20 A Yes. It's when a parent or caregiver complains of  
21 medical complaints for a child, and because of their  
22 history provided there are medical interventions done  
23 that would not otherwise be performed and those

1 interventions put the child at some risk of harm.

2 Q And risk of harm in this case you say is a physical  
3 risk of harm?

4 A There is some physical risk of harm. Young children  
5 in particular are not always cooperative with genital  
6 exams, especially when you're doing evidence  
7 collection you have to do some swabs and so there's  
8 potential risk of harm when you're doing that,  
9 particularly if it's not in a setting where you can,  
10 you know, have an experienced provider doing your  
11 exam all the time.

12 And there's also the risk of just  
13 psychological harm of intense focus by a parent on an  
14 alleged problem that they're just intensely worried  
15 about. The focus on the sexual abuse, the concern  
16 for sexual abuse and the genitals is not healthy for  
17 a child, so there's a risk of psychological harm as  
18 well.

19 Q Okay. And that psychological harm is a risk to the  
20 child's emotional development?

21 A Yes.

22 Q To her emotional self image?

23 A Yes.



1 Q And to her relationship to sexuality?

2 A Yes.

3 MR. MISKELL: I'm going to object and move to  
4 strike the last two opinions because they are not  
5 contained within the report of October 28, 2016.

6 MR. STEELE: Okay. Objection noted.

7 BY MR. STEELE:

8 Q When you speak of emotional injury, does that include  
9 the factors we just discussed?

10 A Yes.

11 Q This is your medical opinion?

12 A Yes.

13 Q And what are your recommendations?

14 A My recommendations were for mother to have a  
15 psychological assessment and to get counseling, and  
16 then I thought it would be useful for Madeline  
17 herself to get counseling if she's old enough, play  
18 therapy if not. It depends on how, you know, how  
19 verbal and how emotionally able she is to do therapy,  
20 but certainly therapy for Madeline would be a useful  
21 thing as well at this time.

22 Q Okay. And what about contact between Julia Eickmeier  
23 and Madeline Kramer at this time?



1           A    It should be limited and definitely supervised  
2               because the risk is that there's the intense focus on  
3               the sexual abuse and the checking the genitals if  
4               it's not supervised. That would be a concern of  
5               mine.

6           Q    Okay.

7                       MR. STEELE: All right. I'll move to  
8               introduce our Exhibits 1, 2 and 3. I think 1 has  
9               been admitted by agreement already, that was the  
10              curriculum vitae.

11                     MR. MISKELL: 2 and 3 are hearsay documents  
12              made in anticipation of litigation and for the  
13              purposes of litigation and therefore are hearsay and  
14              that is the reason for the evidence deposition and  
15              the exploration of her opinions.

16                     MR. STEELE: Okay. Subject to your objection  
17              then I ask that they be admitted and the judge will  
18              rule upon their admissibility at time of trial.

19                     MR. MISKELL: Well, I'll agree that they can  
20              be attached to the transcript and then the judge can  
21              rule on it.

22                     MR. STEELE: That's all I have of this  
23              witness.